

DECLARATION COMBINED WITH POWER OF ATTORNEY

Page 1 of 2

Attorney Docket No. 8003

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled STEROL ESTER COMPOSITIONS the specification of which

(check is attached hereto.

one) was filed on _____ as United States Application No. or
PCT International Application Serial No. _____ and was amended
on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35 United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> <input checked="" type="checkbox"/>
			Yes No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

60/192,412	March 27, 2000	Application Serial No.	Filing Date
------------	----------------	------------------------	-------------

I hereby claim the benefit under Title 35 United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
--------------------------------	-------------------	---------------------------------	--------------------------------------

As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Atty Name	Atty Reg Number.	Associate Power of Attorney Attached
Melody A. Jones	44,175	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Carl J. Roof	37,708	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Erich D. Hemm	47,286	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
James F. McBride	43,874	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Kelly McDow-Dunham	43,787	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Steven W. Miller	31,984	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
T. David Reed	32,931	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Timothy B. Guffey	41,048	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SEND CORRESPONDENCE TO:

Attorney or Agent's Name: Melody A. Jones

The Procter & Gamble Company (513) 634-6944

Company Name Phone No.

6071 Center Hill Avenue Cincinnati Ohio 45224

Street City State Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor David Allen Schul

Inventor's signature _____

Date

Residence 954 East Foster-Maineville Road, Maineville, Ohio, 45039

Citizenship U.S.

Post Office Address 954 East Foster-Maineville Road, Maineville, Ohio, 45039

Full name of second joint inventor, if any Roger Stephen Berger

Inventor's signature _____

Date

Residence 5726 Lake Huron Drive, Fairfield, Ohio, 45014

Citizenship U.S.

Post Office Address 5726 Lake Huron Drive, Fairfield, Ohio, 45014

Full name of third joint inventor, if any John Keeney Howie

Inventor's signature _____

Date

Residence 5958 Olive Branch Road, Oregonia, Ohio, 45054

Citizenship U.S.

Post Office Address 5958 Olive Branch Road, Oregonia, Ohio, 45054

Full name of fourth joint inventor, if any Eugene Harold Lessen, Jr.

Inventor's signature _____

Date

Residence 7115 St. Albans Way, Hamilton, Ohio, 45011

Citizenship U.S.

Post Office Address 7115 St. Albans Way, Hamilton, Ohio, 45011

Full name of fifth joint inventor, if any Vincent York-Leung Wong

Inventor's signature _____

Date

Residence 6467 Katherine Manor Court, Hamilton, Ohio, 45011

Citizenship U.S.

Post Office Address 6467 Katherine Manor Court, Hamilton, Ohio, 45011

Full name of sixth joint inventor, if any Michael Herbert Brock

Inventor's signature _____

Date

Residence 1746 Millbrook Lane, Loveland, Ohio, 45140

Citizenship U.S.

Post Office Address 1746 Millbrook Lane, Loveland, Ohio, 45140